

Please submit form and fee to:

CONTENT AREA MINOR EQUIVALENCY ENDORSEMENT – BIOLOGY EDUCATION

SFN 58254 (05-17)

		Educator's Professional License Number									
Name (Last, First, MI)		Maiden	Name			or				1	
			Socia	cial Security Number (do not use dashes)							
Address											
City		State	Zip Code (9-digit)								
Home Telephone Number	Work Telephone Numl	ber	Date of Birth	Email Address							
High School Attended		High	School City Attended			Sta	State				
must be verified through transc period of five years and is n year limit must obtain the re- some content areas.	ot renewable. Indivi- maining requirement	duals w	ho wish to continu mplete the ME 24 le	e to be e	ndorse	d in the	area a	fter t	he fiv	/e-	
	RIO	logy	Education								
ME 16 requirement: minim			Education It Completed:	# SH	Cont	ent Ne	eded:		# S	SH	
ME 16 requirement: minim Biology with Labs				# SH	Cont	ent Ne	eded:		# S	SH	
-	num of 16 SH			# SH	Cont	ent Ne	eded:		# 8	SH	
Biology with Labs	num of 16 SH			# SH	Cont	ent Ne	eded:		# \$	SH	
Biology with Labs ME 24 requirement: minim	num of 16 SH			# SH	Cont	ent Ne	eded:		# \$	SH	
Biology with Labs ME 24 requirement: minim Biology I	num of 16 SH			# SH	Cont	ent Ne	eded:		# S	SH	
Biology with Labs ME 24 requirement: minim Biology I Biology II	num of 16 SH			# SH	Cont	ent Ne	eded:		# 8	SH	
Biology with Labs ME 24 requirement: minim Biology I Biology II Botany	num of 16 SH			# SH	Cont	ent Ne	eded:		# S	SH	
Biology with Labs ME 24 requirement: minim Biology I Biology II Botany Zoology	num of 16 SH			# SH	Cont	ent Ne	eded:		# \$	SH	
Biology with Labs ME 24 requirement: minim Biology I Biology II Botany Zoology Genetics	num of 16 SH			# SH	Cont	ent Ne	eded:		# 8	6H	
Biology with Labs ME 24 requirement: minim Biology I Biology II Botany Zoology Genetics General Chemistry I	num of 16 SH			# SH	Cont	ent Ne	eded:		# 8	SH	
Biology with Labs ME 24 requirement: minim Biology I Biology II Botany Zoology Genetics General Chemistry I General Chemistry II	num of 16 SH			# SH	Cont		eded:		# 8	SH	
Biology with Labs ME 24 requirement: minim Biology I Biology II Botany Zoology Genetics General Chemistry I General Chemistry II Methods of Teaching Science	num of 16 SH	Conter	Total SH			To	otal SH		# 8	SH	
Biology with Labs ME 24 requirement: minim Biology I Biology II Botany Zoology Genetics General Chemistry I General Chemistry II Methods of Teaching Science	num of 16 SH	Conter	Total SH			To	otal SH		# 8	SH	

In compliance with the Federal Privacy Act of 1974, the disclosure of the individual's social security number on this form is mandatory pursuant to North Dakota Century Code (NDCC) 43-50-02. The individual's social security number is used by the Education Standards and Practices Board (ESPB) as an identification number for file control purposes, background checks, and recordkeeping. ESPB does not advocate, permit, nor practice discrimination on the basis of sex, race, color, national origin, religion, age, or disability as required by various state and federal

Educational Standards and Practices Board

2718 Gateway Ave. Suite 204 Bismarck, ND 58503 (701) 328-9641 office (701) 328-9647 fax



Payment/Credit Card Information

Type of Payment											Amount					
□ Visa		□ MasterCard				☐ Check							;	\$		
Name as it appears on credit card																
<u>Credit Card Number</u> <u>Expiration</u>								Expiration Date		3 digit CVV						
														m m y y		
Billing Address of credit card (if different than the mailing address)																
Address:							-									
City S							S	State						_ Zip Code		

This documentation will be destroyed upon completion of processing.